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## BIB DATA SHEET

CONFIRMATION NO. 3718

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/549,834	06/20/2006	137	3753	23339	
<b>APPLICANTS</b> Rainer Brill, Nidda, GERMANY; Klaus Schlepp, Maxhutte-Birkenhohe, GERMANY; Michael Weber, Bernhardswald, GERMANY; Georg Wattenzellner, Obertraubling, GERMANY;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/00946 02/03/2004					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 103121773 03/19/2003 GERMANY 203182650 11/26/2003					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/13/2006					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /MACADE M BROWN/ Acknowledged Examiner's signature	<input type="checkbox"/> Met after Allowance Indicate	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 19	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> K.F. ROSS P.C. 5683 RIVERDALE AVENUE SUITE 203 BOX 900 BRONX, NY 10471-0900 UNITED STATES					
<b>TITLE</b> Decompression valve					
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		